

MAPPING OF NSW WOMEN'S HEALTH CENTRES

REPORT 2017





INTRODUCTION

The NSW Ministry of Health currently provides \$10.1 million in combined funding each year to 20 Women's Health Centres (WHCs) across NSW:

A Mapping Study to establish a comprehensive understanding of the services provided by WHCs in NSW and their alignment of state and local priorities was completed in 2017. This is a Snapshot of the key findings of the Mapping Study.

- Bankstown Women's Health Centre
- Blacktown Women's and Girls' Health Centre
- Blue Mountains Women's Health and Resource Centre
- Central Coast Community Women's Health Centre
- Central West Women's Health Centre
- Coffs Harbour Women's Health Centre
- Cumberland Women's Health Centre
- Hunter Women's Centre
- Illawarra Women's Health Centre
- Leichhardt Women's Community Health Centre
- Lismore Women's Health and Resource Centre
- Liverpool Women's Health Centre
- Penrith Women's Health Centre
- Rape & Domestic Violence Services Australia
- Shoalhaven Women's Health Centre
- South Coast Women's Health & Welfare Aboriginal Corporation – Waminda
- Sydney Women's Counselling Centre
- Wagga Women's Health Centre
- W.I.L.M.A. Women's Health Centre
- Women's Centre for Health and Wellbeing Albury-Wodonga



funding each year to 20 WHCs across NSW



KEY FINDINGS

SERVICE ACCESS

It is sometimes difficult for women in NSW to access mainstream health services, especially women who have complex needs, women living on limited means, and women who have experienced gender-based abuse. WHCs across NSW provide an avenue for these women to access health-related care and support through:

- creation of a safe, private, women-friendly space
- provision of flexible, holistic care and co-location of services
- a soft entry point
- high profile in community
- simplicity of service navigation
- free or low-cost services
- provision of childcare
- a diverse workforce
- increased time spent with patients and clients
- outreach and targeted programs.

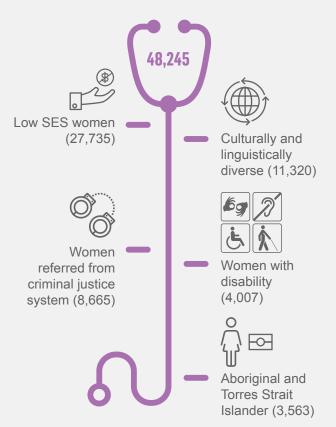
SERVICE PROVISION

Overall, the WHCs are providing a significant number of women in NSW with access to health-related care and support, including counselling and medical appointments with female clinicians, under a relatively unique service delivery model. This service provision is enabled, at least for some women, through initial and ongoing case management, including assistance navigating the broader health system.

There is significant variation, however, in the services offered by individual centres, with some centres almost solely offering medical services and others almost solely offering counselling services. This variation is typically driven by responsiveness to community needs and preferences, current funding arrangements, and capacity to attract and retain qualified clinical staff.

Key service statistics (FY 2016/17)

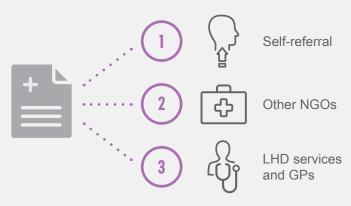
excluding Rape & Domestic Violence Services Australia



Common presenting issues at WHCs



Top referral pathways



Range of services provided by WHCs



Information and referral



Client advocacy and casework



Health education/ Health promotion



Counselling (generalist and specialist)



Medical/ nursing clinics



Massage/ Acupuncture/ Naturopathy

SERVICE GOVERNANCE AND FUNDING

There is evidence to suggest the WHCs' current funding arrangements (especially certainty of funding) have an impact on:

- service access (and potentially outcomes) for women
- recruitment and retention of qualified staff
- capacity for longer-term business planning.

However, there is also evidence to suggest that the centres work collaboratively with other organisations to maximise the impact of their funding.

While all centres demonstrated a consistently high level of corporate governance, there was variation in the clinical governance observed across centres. This variation appears influenced by the extent of primary medical services as well as the size of the centre.

All centres are accredited, some with commendation, under either the Quality Improvement Council Standards, the Australian Service Excellence Standards, or the Royal Australian College of General Practice; this level of scrutiny is rare amongst non-government organisations.

SERVICE OUTCOMES

While no primary data on outcomes was collected for this mapping study, there is evidence to suggest that collectively the WHCs have made a positive impact on the health and wellbeing of:

- women who access the centres
- the centres create an enabling environment for improvements in women's health
- there is potential for a reduction in morbidity and mortality for women accessing the centres
- women who do not directly access the centres
- children and family members.

Occasions of service (FY 2016/17)





Medical appointments (41,505)



Nursing appointments (12,308)



management (52, 161)



Counselling appointments (18,517)



Complementary therapies (7,437)

CONCLUSION

The Women's Health Centres (WHCs), and the non-government sector more broadly, offer unique value to consumers, practitioners, and to the NSW health system. The centres are providing a multitude of primary health and wellbeing services to a group of women who may have otherwise only received care and support via the acute system.

Centre staff work collaboratively with other organisations to ensure maximum reach and impact within their current funding arrangements, and therefore represent good value to funding bodies, including the Ministry.

The following service delivery elements have been identified as crucial factors for the provision of wraparound service support for women:



Ease of service access and navigation



Flexibility in service provision



Nimbleness in service provision

The review has identified that there are real benefits experienced by women as a result of the services offered through the WHCs, and it appears that the centres contribute to the following Commonwealth and State health priorities:



reducing mental healthrelated burden of disease



reducing intimate partner violence-related burden of disease



reducing cancer-related burden of disease



preventing or delaying chronic disease

Overall, the WHCs are providing a significant number of women in NSW with access to health-related care and support, including counselling and medical appointments with female clinicians, under a relatively unique service delivery model.

RECOMMENDATIONS

The Report recommended that:

- Funding arrangements be amended from annual to a minimum three yearly funding to provide greater certainty for WHCs.
- WHCs, the Ministry, Local Health Districts (LHDs), Women's Health NSW and other stakeholders work together to implement more consistent clinical governance of services offered at the centres.
- An evaluation of WHCs be undertaken, and the Ministry, LHDs, Women's Health NSW and WHCs work together to develop and implement mechanisms for more meaningful outcome reporting.

NEXT STEPS

The NSW Ministry of Health proposes to use the findings and recommendations from the project to strengthen the planning and performance of WHC services by:

- establishing appropriate governance to progress the program of work
- enhancing clinical governance of services offered at WHCs
- co-designing more robust outcome reporting for WHCs, noting that the need for further evaluation will be determined at a future date.

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NSW Ministry of Health, Snapshot of the Mapping of NSW Women's Health Centres Report 2017

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